

EXHIBIT C

RECORDING REQUESTED BY
CLAY DUNN ENTERPRISES, INC. DBA AIR-TEC
WHEN RECORDED MAIL TO

CLAY DUNN ENTERPRISES, INC DBA
AIR-TEC
1606 E. CARSON STREET
CARSON, CA 90745

01-08-8373

09/30/08



20081754619

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

Release of Mechanics' Lien

CLAY DUNN ENTERPRISES, INC. DBA AIR-TEC

The undersigned, CLAY DUNN ENTERPRISES, INC. DBA AIR-TEC,
does hereby release that certain Mechanics' Lien, dated the 18TH day of SEPTEMBER
and recorded as instrument No. 20081686725 on the 18TH day of SEPTEMBER
in Book Page of Official Records, of LOS ANGELES County,
and in which Mechanics' Lien CONSTITUTION PLACE, LLC
is/are named as the reputed owner(s) of the property described in said lien, and ENVIRONMENTAL CONTRACTING
CORPORATION, 880 EAST 1ST STREET, LOS ANGELES CA 90067 is named as person or company by whom
claimant was employed or to whom claimant furnished labor, services, equipment or materials, and does hereby
release the premises described therein from the said claim of lien, which premises are described as follows:

STREET ADDRESS: 10250 CONSTITUTION BOULEVARD, 24TH FLOOR
LOS ANGELES, CA 90067

LEGAL DESCRIPTION: LEHMAN BROTHERS-CENTURY CITY

Name of Claimant CLAY DUNN ENTERPRISES, INC. DBA AIR-TEC
By Chayley Shambler
(*Printed Name*)
Date SEPTEMBER 30, 2008 CREDIT MANAGER
(*Signature*)
(*Authorized Capacity*)

CERTIFICATE OF ACKNOWLEDGEMENT

State of California

County of _____

On _____, _____, before me, _____,
a notary public, personally appeared _____,
personally known to me (or proved to me on the basis of satisfactory evidence) to be the
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to
me that he/she/they executed the same in his/her/their authorized capacity(ies), and that
by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of
which the person(s) acted, executed the instrument.

WTNESS my hand
and official seal.

CAPACITY CLAIMED BY SIGNER

- | | |
|--------------------------|----------------------|
| <input type="checkbox"/> | INDIVIDUAL |
| <input type="checkbox"/> | CORPORATE OFFICER(S) |
| <input type="checkbox"/> | TUTOR |
| <input type="checkbox"/> | PARTNER(S) |
| <input type="checkbox"/> | LIMITED |
| <input type="checkbox"/> | GENERAL |
| <input type="checkbox"/> | ATTORNEY-IN-FACT |
| <input type="checkbox"/> | TRUSTEE(S) |
| <input type="checkbox"/> | GUARDIAN/CURATOR |
| <input type="checkbox"/> | OTHER _____ |

SIGNER IS REPRESENTING:
Names of person(s) or entity(s) _____

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Los Angeles

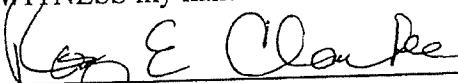
On 9-30-2008 before me, Romy E. Clarke, Notary Public
(Here insert name and title of the officer)

personally appeared HAYLEY AMBERG,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



(Notary Seal)

Signature of Notary Public

ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they- is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT

RELEASE OF MECHANIC'S

(Title or description of attached document)

LIEN

(Title or description of attached document continued)

Number of Pages 1 Document Date 9-30-08

61088373

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
 Corporate Officer

(Title)

- Partner(s)
 Attorney-in-Fact
 Trustee(s)
 Other CREDIT MANAGER